

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF NEVADA

## PROOF OF CLAIM

Name of Debtor  
USA COMMERCIAL MORTGAGE CO

Case Number:

06-FO725-LBR

RECEIVED AND FILED

NOTE See Reverse for List of Debtors and Case Numbers  
This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.

## Name of Creditor and Address:

MARCIAS KNOX TRUST  
DATED 8/16/2004  
C/o MARCIA J. KNOX TRUSTEE  
1885 VINTNERS PL  
RENO, NV 89519

Creditor Telephone Number ( ) (775) 826-9195

Last four digits of account or other number by which creditor identifies debtor

Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars

Check box if you have never received any notices from the bankruptcy court or BMC Group in this case

Check box if this address differs from the address on the envelope sent to you by the court

BANKRUPTCY COURT CLERK

2006 OCT 16 P 1:32

RECEIVED AND FILED

2006 OCT 16 P 1:3

U.S. BANKRUPTCY COURT PATRICIA GRAY CLERK

DO NOT FILE THIS PROOF OF CLAIM FOR A SECURED INTEREST IN A BORROWER THAT IS NOT ONE OF THE DEBTORS

If you have already filed a proof of claim with the Bankruptcy Court or BMC you do not need to file again

THIS SPACE IS FOR COURT USE ONLY

## 1 BASIS FOR CLAIM

Goods sold       Personal injury/wrongful death  
 Services performed       Taxes  
 Money loaned       Other (describe briefly)

 Retiree benefits as defined in 11 U.S.C. § 1114(a) Wages salaries and compensation (fill out below)

Last four digits of your SS # \_\_\_\_\_

Unpaid compensation for services performed from \_\_\_\_\_ to \_\_\_\_\_

 Unremitted principal Other claims against servicer (not for loan balances)

(date) (date)

## 2 DATE DEBT WAS INCURRED

6/2/2005

## 3 IF COURT JUDGMENT, DATE OBTAINED

## 4. CLASSIFICATION OF CLAIM Check the appropriate box or boxes that best describe your claim and state the amount of the claim at the time case filed

See reverse side for important explanations

## UNSECURED NONPRIORITY CLAIM \$

Check this box if a) there is no collateral or lien securing your claim or b) your claim exceeds the value of the property securing it, or if c) none or only part of your claim is entitled to priority

## SECURED CLAIM

Check this box if your claim is secured by collateral (including a right of setoff)

## Brief description of collateral

Real Estate     Motor Vehicle     Other \_\_\_\_\_

Value of Collateral \$ 8,000,000-

Amount of arrearage and other charges at time case filed included in secured claim if any \$ SEE OTHER CLAIMS

## UNSECURED PRIORITY CLAIM

Check this box if you have an unsecured claim all or part of which is entitled to priority

Amount entitled to priority \$ \_\_\_\_\_

Specify the priority of the claim

Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B)  
 Wages, salaries, or commissions (up to \$10,000)\* earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business whichever is earlier - 11 U.S.C. § 507(a)(4)  
 Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(5)

Up to \$2,225\* of deposits toward purchase, lease or rental of property or services for personal family or household use - 11 U.S.C. § 507(a)(7)

Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8)

Other - Specify applicable paragraph of 11 U.S.C. § 507(a) (\_\_\_\_)

\*Amounts are subject to adjustment on 4/1/07 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment

## 5. TOTAL AMOUNT OF CLAIM \$ \_\_\_\_\_ AT TIME CASE FILED

\$ 50,000.00 \$ \_\_\_\_\_

\$ \_\_\_\_\_

(unsecured)

(secured)

(priority)

(Total)

 Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges

## 6. CREDITS The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim

7. SUPPORTING DOCUMENTS Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS If the documents are not available explain. If the documents are voluminous attach a summary

## 8. DATE-STAMPED COPY To receive an acknowledgment of the filing of your claim enclose a stamped, self-addressed envelope and copy of this proof of claim

THIS SPACE FOR COURT USE ONLY

BY MAIL TO

BY HAND OR OVERNIGHT DELIVERY TO

220 E. 4th Street  
Ste 100  
Reno, NV 89501

DATE

SIGN and print the name and title if any of the creditor or other person authorized to file this claim (attach copy of power of attorney if any)

10/10/2006

MARCIA J. KNOX TRUSTEE OF THE

MARCIA J. KNOX TRUST DATED 8/16/04

Penalty for presenting fraudulent claim is a fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 AND 2511